

to face numerous challenges in accessing quality care. Hispanics make up 23 percent of the total uninsured population. According to a report by the Kaiser Commission on Medicaid and the Uninsured, nearly 37 percent of Hispanics under the age of 64 are uninsured. Sadly, 31 percent of Hispanic children are uninsured.

Access to affordable, quality health care is a challenge—this includes economic challenges, language barriers, cultural differences, citizenship status, even location plays a key role. And we know that it has a direct relation to health disparities. Hispanics continue to suffer disproportionately from chronic and infectious diseases such as diabetes, cancer, HIV/AIDS, and tuberculosis.

We need targeted public policy changes to reverse these trends in both the short-term and the long-term. I believe we can do so by greatly expanding insurance and other coverage, by addressing specific diseases that disproportionately impact the Hispanic community (and other communities of color), and by making institutional changes in our health professions and training so that more doctors are sensitive to the particular needs of the Hispanic community.

The Hispanic Health Improvement Act offers a variety of different strategies for expanding health care coverage, improving access and affordability, reducing health disparities and strengthening our nation's health care workforce. While I consider each provision in our bill to be important, I am just going to highlight some of the more urgent ones.

In order to address the lack of health care coverage, we examined ways to expand existing programs like SCHIP and Medicaid. While this is not a new idea, it will have an enormous impact on the Hispanic population. The legislation provides for the expansion of the successful State Children's Health Insurance Program (SCHIP) to cover uninsured low-income pregnant women and parents. In addition, it provides states the option to enroll legal immigrant pregnant women and children in Medicaid or SCHIP, and other individuals based on need.

The bill also provides for a number of measures to reduce health disparities. First and foremost, it requires an annual report to Congress on how federal programs are responding to improve the health status of Hispanic individuals with respect to diabetes, cancer, asthma, HIV infection, AIDS, substance abuse, and mental health. Increased funds are provided for targeted diabetes prevention, education, school-based programs, and screening activities in the Hispanic community. Similarly, the bill provide for targeted funding for programs aimed at the prevention of suicides among Hispanic girls.

Access and affordability are key components to improving Hispanic's health care status. The bill provides for grants to expand dental services in medically underserved areas. Provisions are included to support promotoras, or community health workers, who work to improve the health of women and families. A special emphasis is placed on border health by authorizing \$200 million to improve health and infrastructure along the U.S.-Mexico border. Communities along the border often experience health care provider shortages making them medically underserved areas.

The last title of the Hispanic Health Improvement Act focuses on the reduction of

health care disparities by addressing the lack of providers who can provide culturally competent and linguistically appropriate care. The bill provides for increased funding for HRSA's health professions diversity programs. It also seeks to promote the training of bilingual health professionals and creates a Center for Linguistic and Cultural Competence in Health Care within OMH. The Center would carry out programs that promote and facilitate the provision of health-related services, education, and training in a culturally competent manner.

Mr. Speaker, I ask my colleagues to support and cosponsor the Hispanic Health Improvement Act. As the Hispanic community continues to grow, the implementation of these provisions will take on an even greater importance. The consequences of inaction will be felt for years to come in greater health care needs, lower productivity, and higher rates of mortality and disability.

ASIAN PACIFIC AMERICAN HERITAGE MONTH

SPEECH OF

HON. JANICE D. SCHAKOWSKY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Monday, May 19, 2003

Ms. SCHAKOWSKY. Mr. Speaker, it is my honor and privilege to stand before my colleagues and celebrate Asian Pacific American Heritage Month. Asian and Pacific Americans have been a part of this country for over 200 years, with one of the first Asian American communities, the Filipino community, being established in the Louisiana Bayou in 1763. Since that date, the Asian Pacific American community has come a long way.

According to Census projections, Asians and Pacific Islanders (APIs) will account for 6.5 percent of the nation's population by the year 2025, and by 2050 they will account for 9.3 percent. Consequently, by 2050 about one out of every 11 Americans will trace their heritage to API roots. As this community continues to grow, it is important for all of us to continue to learn from each other.

In the 9th Congressional District, I am very fortunate to represent a vibrant and productive Asian Pacific American community that totals over 70,000 people. The community is very diverse, including Chinese, Indians, Pakistanis, Bangladeshis, Vietnamese, Koreans, Filipinos, and Samoans. Ranging from doctors to teachers to small business owners, each member of the API community enhances our district and makes it a better place to live and work for all of my constituents. Whether I am marching in Indian, Pakistani, Bangladeshi, and Sikh parades on Devon Street or celebrating the Lunar New Year on Argyle Street, I cannot help but feel a sense of pride when I see so many different cultures all tied to the single bond of being American.

Congress recognizes the importance of the Asian Pacific American community and displays this through the numerous Caucuses representing many nations, ranging from India to Cambodia. Congressional staffers have also done their part to educate themselves about the Asian Pacific American community through staff organizations such as CAPASA, the Congressional Asian Pacific American Staff Association, and SAACSA, the South Asian Amer-

ican Congressional Staff Association, of which I am proud to be a sponsor. As a Member of Congress, I will continue to utilize these resources to work with community leaders on key issues such as education and immigration, as well as encourage more Asian Americans to enter the public sector at the local, state and federal levels.

The rich cultural history and traditions of Asian Pacific communities enrich all of our lives and contribute to the American culture. Now more than ever, we need to work side by side with community leaders to help educate those outside the community that Asian Pacific Americans are, first and foremost, Americans who share the same core values and beliefs as all communities in this country. The Asian Pacific American community has come so far in such a short period of time, and I am confident that it will only continue to grow and thrive while maintaining its many cultures and values.

IN SUPPORT OF YEVGENIYA
DOBROVOLSKA AND MYKOLA
DOBROVOLSKYY

HON. ANNA G. ESHOO

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 22, 2003

Ms. ESHOO. Mr. Speaker I rise today to introduce a private relief bill on behalf of Yevgeniya Dobrovolska and Mykola Dobrovolskyy.

Mr. Speaker, in 1999, Alexander Dobrovolskiy brought his wife Yevgeniya and son Mykola to the United States from the Ukraine to pursue the American dream. He worked for Prophet Financial Systems, Inc. and immediately impressed his colleagues as a committed and hard working man. Most importantly, Alexander Dobrovolskiy's greatest source of pride was his family and he demonstrated this pride as a dedicated husband and father.

Tragically, Alexander Dobrovolskiy was killed in a car accident on November 8, 2002. Prior to his death, he had applied for a green card, with his wife and son as beneficiaries of this petition. As a result of his unforeseen death, this application will be automatically terminated and his wife and son will be denied their green cards.

I'm proud to introduce a bill which provides relief for Yevgeniya Dobrovolska and Mykola Dobrovolskyy. My bill readjusts their status to permanent resident status so that Yevgeniya and Mykola will be able to remain in the United States and continue to live out the dream of Alexander.

Mr. Speaker, I ask my colleagues to join me in supporting this bill which will restore the hopes of Yevgeniya Dobrovolska and Mykola Dobrovolskyy.

TRIBUTE TO MIKE ALLEN

HON. RALPH M. HALL

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, May 22, 2003

Mr. HALL. Mr. Speaker, I rise today to pay tribute to a beloved friend, outstanding community leader and longtime Congressional